



INVESTIGATING THE LEVEL OF AWARENESS REGARDING INFORMED CONSENT AMONG THE POST-OPERATIVE PATIENTS IN SURGICAL WARD

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<p>ARTICLE INFO</p> <p>Keywords: Patients' Rights, Level of Awareness, Informed Consent, Knowledge, Awareness</p> <p>Corresponding Author: Amir Sultan, Associate Professor and Head of Nursing Department, Times Institute Multan</p> <p>Email: amirsultan204@gmail.com</p>	<p>ABSTRACT</p> <p>Background: The concept of informed consent is an important aspect of biomedical ethics, which is obtained in written form, but in some cases, it may be verbal, especially for non-invasive and relatively non-risky interventions. The study was conducted with the aim of evaluating the level of awareness among post-operative patients regarding informed consent.</p> <p>Methodology: The study design was cross-sectional descriptive and was conducted in the surgical ward of a tertiary care hospital in Swat, Pakistan from December 2023 to January 2024. The sample size of the study was 180 using the purposive sampling technique, while a valid and reliable questionnaire was used for data collection. Descriptive statistics were used through SPSS 22.0. The study was approved by an ethical review committee, and informed consent was obtained from every respondent.</p> <p>Results: The finding reveals that the majority of the participants were female 112 (55.7%), the age group 36–45 years was 75 (37.3%), and people belonged to village 189 (94%). The maximum number of patients level of awareness was good (58%), while the remaining 42% had a poor level of awareness. The majority of the patients know the type of surgery 181 (90%), alternative treatment to the surgery 123 (61.2%), number of hours to be nothing per oral (NPO) 190 (94.5%), time of surgery 197 (98%), and overall satisfaction regarding informed consent 201 (100%).</p> <p>Conclusion: The study found that patients lack awareness about the surgeon, procedure process, advantages and disadvantages, procedure importance, anesthesia type, and complications, highlighting the need for enough information regarding their procedure.</p>
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INTRODUCTION

The World Health Organization (WHO) defines the patients' rights charter as granting patients access to appropriate care and treatment, information access, information confidentiality, independence, education, complaint procedures, and recompense [1].

A key component of biomedical ethics is the idea of informed consent, healthcare providers have an ethical duty to respect patients' autonomy and provide them the freedom to choose any recommended medical, surgical, or other treatments as well as research interventions [2]. Informed consent is a widely accepted safety measure for patients having invasive operations [3]. Patient autonomy (a), or the client's capacity to make decisions for themselves about the procedure that will be performed on their body, is a prerequisite for obtaining informed consent. When it comes to the therapeutic alternatives that doctors recommend, patients have autonomy and choice [4, 5]. Patient understanding (b) refers to the patient's capacity to comprehend explanations made by medical professionals [5]. In order to make an expert judgment, a health care practitioner must provide enough information (c), which is defined as providing the diagnosis, prognosis, treatment option, potential risks, and benefits in a clear and intelligible manner [4, 6]. The terms "competency," "voluntarism," and "consent" (d) refer to the client's ability to understand the information presented, their willingness to assent based only on information provided, and their agreement to the proposed treatment process with full comprehension on the part of the treating physician. A written consent form (g) that the patient signs before to surgery is available [7, 8]. A number of variables, such as patient competency, incomplete information provided, poor patient-professional communication, hospital environment, privacy concerns, and insufficient time, may impact surgical informed consent [9,] (Bhute 2017, Lennox and Wright 2019, Teshome et al. 2018). Patients' perspectives on the goal of the surgical informed consent procedure differ, but most believe it should allow patients to make their own decisions (Hammami et al. 2014). Nevertheless, patients find the process essential. The basis for informed consent is the patient's ethical and legal right to control what happens to their body and the doctor's ethical obligation to involve the patient in their treatment. A significant amount of cross-disciplinary collaboration may be necessary to address a variety of challenges that may come up in the practice of medicine. One such issue is informed consent, which is a part of medical ethics and which the federal and state constitutions could enact into legislation. It could also be implemented as an institutional policy or practice for risk management or medical ethics to uphold individual professional standards of care [9]. The protection of the patient in medical practice at several standards, such as ethical, legal, and administrative goals, is known as informed consent [3, 4]. The informed consent form facilitates the patient's shared decision-making during the surgical treatment and fosters trust between

patients and doctors. Before entering the operating room, every surgeon makes sure to review the informed consent letter. It is against the law and unethical to perform any intrusive surgery without signed consent [8]. In the primary study, the composite variable measured the client's knowledge and perception of informed consent. The extent to which a patient is aware of the reasons behind their surgery, alternative treatment options, the type of surgery, risks associated with anesthesia, postoperative care, surgical complications, the legal requirement for informed consent, the right to revoke consent after signing, and who is protected are all indicators of their level of knowledge regarding informed consent [10, 11]. Therefore, the aim of the study was to evaluate the level of knowledge among patients regarding the contents of informed consent in tertiary care hospital of swat KPK.

Methodology

This was a descriptive cross-sectional study carried out in Saidu Group of Teaching Hospital in Swat KPK from December 2023 to January 2024. The sample size for the study was calculated and estimated with a 95% confidence interval from 201 patients. Patients was selected consequently from the surgical department of Saidu group of teaching hospital using purposive sampling technique. The study objective and purpose were explained to each patient before a consent. after understanding the questions, I asked them and tick the option. we stayed with the patient. we stayed with patient until all questioned had been answer and we give at least 20 minutes to each patient for a questionnaire .The inclusion criteria for the patient was: patient having post-operative, and age 18 and above. Patient having multiple complications, remain unconscious after procedure, mentally retarded or unwilling to be the part of the study voluntary were the exclusion criteria for the patients. The data collection process was started after taking permission from the administration of study setting. Patients who were post-operative were approached and evaluated for the inclusion criteria. The data was collected in two steps: In first step we collect the demographic data of the participate that includes age, gender, living status. In the second step we collected data regarding awareness of informed consent. A valid and reliable adopted questionnaire were used for data collection.

Informed consent questionnaire: The checklist contains 13 items having dichotomous response (Yes/No) [12]

The data analysis was performed through Microsoft Excel and SPSS version 22 as descriptive statistics. Frequency and percentages were calculated for categorical variables, while mean and standard deviation was calculated for continuous variables. The study was approved by the ethical review committee of tasleem college of nursing and health sciences, while permission was granted from study setting for data collection, and informed consent were taken from each participate to protect their ethical rights.

Results

In the current study the number of female patients were higher 112 (55.7%) then male patients 89 (44.3%) were higher in number, patient age group 36-45 years were 75 (37.3%) followed by age group 45-55 years 72(35.2%), while patient belong to village was 189 (94%). see table 1.

Table 1: Demographic data of the participants		
	Frequency 201	%
Gender		
Male	89	44.3
Female	112	55.7
Age		
18-25 years	0	0
26-35 years	27	13.4
36-45 years	75	37.3
46-55 years	72	35.8
56 and above	27	13.4
Living status		
Village	189	94.0
City	12	6.0

Knowledge among patients regarding informed consent

The maximum number of patient know type of surgery 181 (90%), alternative treatment to the surgery 123 (61.2%), number of hours to be Nothing per oral (NPO) 190 (94.5%), time of surgery 197 (98%), and overall satisfaction regarding informed consent 201 (100%). On another hand the maximum number of patient does n,t have awareness regarding procedure 125 (62.2%), name of surgeon 125 (62.2%), advantages and

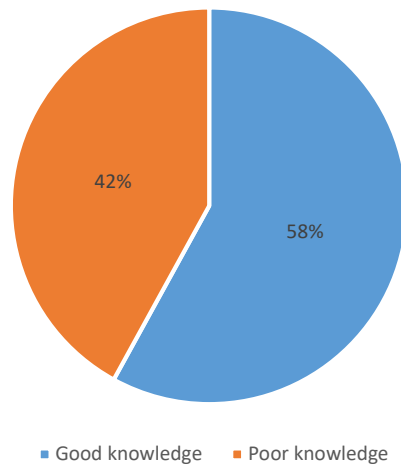
disadvantages of surgery 135 (67.2%), importance of procedure 129 (64.2%), type of anesthesia used in procedure 139 (69.2%), risk and complications associated with anesthesia 159 (79.1%), and duration of anesthesia 162 (80.6%).

Figure 2: Awareness of informed consent among the participants

#	Questions	Yes	No	Mode
1	Post-operative status	201 (100%)	0	1
2	Enough information regarding procedure?	76 (37.8%)	125 (62.2%)	2
3	Know their surgeon name?	76 (37.8%)	125 (62.2%)	2
4	Type of surgery?	181 (90%)	20 (10%)	1
5	Know alternative treatment?	123 (61.2%)	78 (38.8%)	1
6	Advantage and disadvantages regarding surgery?	66 (32.8%)	135 (67.2%)	2
7	Importance of surgery?	72 (35.2%)	129 (64.2%)	2
8	Type of anesthesia used in their procedure?	62 (30.8%)	139 (69.2%)	2
9	Risk and complication associated with anesthesia?	42 (20.9%)	159 (79.1%)	2
10	Hours of NPO?	190 (94.5%)	11 (5.5%)	1
11	Time of surgery?	197 (98%)	4 (2%)	1
12	Duration of anesthesia?	39 (19.4%)	162 (80.6%)	2
13	Satisfaction regarding informed consent?	201 (100%)	0	1

Figure 1 illustrates that majority of the patients were have good awareness regarding the contents of informed consent (58%), while the remaining (42%) were have poor level of awareness regarding informed consent.

Figure 1: Level of awarness regarding informed consent



Discussion

In Pakistan, the idea of informed consent is becoming more widely accepted and significant in the medical field. When a patient makes a decision about their healthcare, healthcare practitioners make sure they are fully educated about the nature of their ailment, suggested treatment options, potential risks and benefits, and available alternatives. This process is known as informed consent [13]. The current study aim was to evaluate the level of awareness among post-operative patients regarding the process of informed consent and its information through a 13 items questionnaire. In the present study 42% of the patients were awareness regarding informed consent while the rest of 58% were having poor awareness regarding informed consent. it may be due to majority of the patients were female 112 (55.7%) and belong to villages 189 (94%), and due to cultural restrained majority of the female does n,t received high education, moreover people of village don,t have the facilities of advance care so patient when visit to hospital they consider that whatever action (procedure or treatment) taken by the healthcare workers will take they will have positive outcome. A study conducted in Pakistan also reveals that a little number of patients (20%) were aware of informed consent process. These were wealthy professionals, most of whom were men, or their spouses. The others demonstrated a lack of knowledge of fundamental medical ethical procedures. The patients' level of education was concerning; at least 60% of them had more education than a high school certificate, but they were unaware of the concept of informed consent [9]. Another study conducted in Pakistan that used similar questionnaire of the current study that It was discovered that there was little knowledge of the informed consent form in the current study, which included over thirteen

questions concerning it. The participants had low understanding in relation to questions 3, 5, 9, and 11 [12]. In the current study patient have good information regarding other options of treatment (61.2%). it is because the concept of informed consent in Pakistan is associated with surgeon or doctor, while the nurse remain as witness of the information or recheck the status. The surgeon inform patient regarding the procedure how it will be completed and what are the alternative options other than that surgery. According to the study that was complete in Pakistan report that the choices that patients make about their treatments are entirely based on the nursing and medical personnel. Patients heed the advise of these staff members without question [12]. Within the Just 30% of the patients in the current research who were questioned if they had been informed about other treatment alternatives replied in the affirmative. In a related research, 49 percent of the patients in Ireland's trial were aware of the alternate therapy choice. The findings of this study may thus be compared to those of other worldwide investigations [14]. Comparing the current study 90% were have knowledge about the procedure, because the procedure are explained by surgeon to patient and their family member in local language which they understand better, moreover the doctor asked cross question to evaluate the level of awareness of the patient regarding their surgery. While a study in Pakistan shows that only 38% of patient was aware of the procedure [12]. Another study conducted by Burns et al. in Adelaide, Australia, to determine if patients get sufficient information regarding the procedure. The majority of patients expressed dissatisfaction with the information they had been given before to surgery [15]. A study in Ethiopia found that a majority of patients (77.2%) had poor awareness of surgical procedures, with 72.7% in Egypt, 83 % in Rwanda and 89.5% in another Ethiopian study was poor level of awareness [16,17,18,]. Another study conducted in Ethiopia revealed that majority of the patient (77.2%) level of awareness was poor, while Egyptian study shows 72.7% of the surgical patients level of awareness was poor [16, 17]. The study conducted in Rwanda shows 83% awareness was poor, another Ethiopian study reveals 89.5%.

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